

EXHIBIT “D”

VOCATIONAL REHABILITATION ASSESSMENT REPORT

REGARDING:

TINA LINDQUIST OSSA

FOR LAW FIRM OF:

MEYER, DARRAGH, BUCKLER, BEDENEK, & ECK, P.L.L.C.

SUBMITTED:

March 13, 2006

BY:



DAVID A. ZAK, MEd, CRC, LCP, CLCP
Rehabilitation Consultant

TABLE OF CONTENTS

INTRODUCTION	1
RECORDS REVIEWED	1
MEDICAL SUMMARY	2
CURRENT MEDICAL TREATMENT.....	4
CHIEF REPORTED PROBLEMS	4
EDUCATIONAL/VOCATIONAL	5
ENVIRONMENTAL/SOCIAL.....	5
BEHAVIORAL OBSERVATIONS.....	6
LIMITATIONS/CAPABILITIES.....	6
VOCATIONAL ASSESSMENT	7
CASE CONSIDERATIONS	8
WAGE EARNING CAPACITY	9
SUMMARY ..	11

INTRODUCTION

The file of Tina Lindquist Ossa was referred by Paul R. Robinson of Meyer, Darragh, Buckler, Bebenek, & Eck, PLLC for a Rehabilitation Evaluation. The purpose of this report is to discuss the extent to which residuals of a September 25, 2002 injury affect Mrs. Ossa's vocational potential and wage earning capacity.

Tina Ossa is a twenty-three year old, right hand dominant, white female whom I interviewed on March 3, 2006 at the Erie, Pennsylvania office of Dallas W. Hartman, PC. Mr. Wayne P. Reid, Esquire, was present throughout the interview.

Conclusions in this report are based on consideration of Mrs. Ossa's medical status, physical limitations and/or restrictions, vocational and educational factors, and labor market data.

Meyer, Darragh, Buckler, Bebenek, & Eck provided the information listed below.

RECORDS REVIEWED

12/04/95 – 3/24/03	Mariano D. Loveranes, MD Office Notes & Records
10/13/00 – 9/27/04	Corry Manufacturing Company Tina Lindquist's Personnel Records
9/25/02	Life Star Life Flight Flight Note & Record
9/25/02 – 12/12/03	Hamot Medical Center Admission, Diagnostic, Nursing, Operative, Progress, and Discharge Reports & Records
9/27/02 – 12/06/04	Paradigm Health Services Initial & Follow-up Case Management Reports
10/07/02 – 12/30/02	Great Lakes Home Healthcare Assessment, Progress, and Discharge Notes & Reports
10/15/02 – 4/27/05	John M. Hood, MD Office Notes & Records
10/17/02 – 1/31/03	Counseling Services Center, Inc. Office Note & Records
3/28/03 – 3/07/05	Hamot Surgery Center Operative Notes & Records
8/03/04	Complaint

RECORDS REVIEWED (Continued)

8/12/04 – 9/16/04	Chris L. Nelson, DPM Office Notes & Records
9/28/04 – 11/15/04	Hand & Arthritis Rehabilitation Center, Inc. Assessment/Discharge Notes & Correspondence
6/28/05	Tina Lindquist Deposition
11/11/05	Donal F. Kirwan, SPHR Report & Curriculum Vitae
2/07/06	Verzilli & Verzilli and Consultants, Inc. Report & Curriculum Vitas

MEDICAL SUMMARY

On September 25, 2002, while operating a punch press at Corry Manufacturing Company in Corry, Pennsylvania, Tina Lindquist Ossa suffered bilateral crush injuries to her hands. She received immediate care from co-workers and was transported to Corry Hospital where she was stabilized and then transported via air flight to Hamot Medical Center in Erie, PA.

At Hamot Medical Center surgical intervention was suggested based on the extent of her injuries, which included avulsions and/or segmental loss, vascular, tendon, nerve, and bone involvement of all of her digits except for her bilateral thumbs. Mrs. Ossa was admitted to Hamot's Hand Services where she underwent reconstructive surgical interventions by Dr. D. Patrick Williams and Dr. John M. Hood. As a result of her injuries it was necessary to amputate her right small finger and her left index and small fingers.

At Hamot Medical Center her recovery was unremarkable until October 5, 2002 when she underwent amputation of her right index finger as it was necrotic. Psychological consultations by Michael Schwabenbauer, PhD noted no significant changes in cognitive functioning, the presence of mild to moderate anxiety and fear, and the need to monitor her ongoing adjustment to her current life situation. He noted a supportive familial situation and Mrs. Ossa's resilience. On October 7, 2002 she was discharged home with support services including skilled nursing, personal care assistance, medical follow-up with Dr. Hood, adjustment counseling, and medical case management.

Mrs. Ossa received skilled nursing services for wound care through December 28, 2002. On December 10, 2002 Joan Porter, OT, completed an occupational therapy evaluation and noted continued need for assistance with some activities of daily living and the independent use of a telephone, a television remote control, and turning the pages of a book. She recommended continued therapy for range of motion activities. Mrs. Ossa also saw Nora Blue, LSW on four occasions for adjustment counseling, the last being on November 19, 2002. Personal attendant care averaged approximately nine hours per day.

MEDICAL SUMMARY (Continued)

Mrs. Ossa continued to treat with Dr. Hood on a regular basis. He monitored the status of her healing and initiated surgical interventions to increase her functional abilities and decrease her residual pain and discomfort. In April 2003 he performed an open reduction and internal fixation of the long and ring fingers of her right hand for better alignment and stability. Mrs. Ossa continued to receive personal attendant care. The hours of care varied, depending on her level of independence and post-surgical status.

Records indicate Mrs. Ossa continued to demonstrate increased independence. In July 2003 it is noted she was able to care for her husband's two young children, ages five and three at that time, on a part-time basis, with some assistance from family members as needed. She also complained of ongoing difficulty with the long and ring fingers of her left hand. She had little movement of those fingers and they often interfered with her actions. She noted an interest in vocational retraining.

Due to flexion contractures and decrease in functioning of her left long and ring fingers, Mrs. Ossa underwent amputation and toe-to-hand transfer in December 2003. Dr. Hood and Dr. Williams transplanted the second toe of her right foot to her left hand after amputating her left long and ring fingers. Her recovery was unremarkable except for additional vascular intervention directly following the surgery. She was released to her home on December 12, 2003. She continued receiving personal attendant care and to follow-up with Dr. Hood.

In May 2004 Dr. Hood performed an open reduction and internal fixation of Mrs. Ossa's left metacarpal with bone graft and longitudinal rod placement in an effort to improve the functioning of the toe transplant. Her surgery and recovery were unremarkable. Records indicate Mrs. Ossa continued to use personal care assistance and pain medication as needed.

In June 2004 Mrs. Ossa reported using a personal care assistant approximately thirteen hours per week. She reported using no pain medication. She noted being able to perform activities of daily living. She attempted to perform some household chores including cleaning, vacuuming, and laundry, but experienced an increase in pain and discomfort. She also required assistance lifting larger and heavier objects including a laundry basket.

On September 28, 2004 Mrs. Ossa underwent an evaluation for assistive devices by Donna Mahoney, PT, certified hand specialist. Ms. Mahoney suggested various devices to increase her level of independence in the home and community. Her November 15, 2004 discharge summary indicated eighteen items were purchased for Mrs. Ossa and training for their use was provided by Ms. Mahoney.

In March 2005 Dr. Hood extracted scar tissue and deepened the web space between the index stump and the thumb on her left hand. Her recovery was unremarkable. Mrs. Ossa reported the operation reduced the discomfort of the scar tissue mass and increased her ability to grip with her left hand.

Past medical history indicates recurrent bilateral great toe infections as the result of ingrown toenails. In August 2004 Dr. Nelson removed the nail and matrix of both great toenails and excised the granulomas of the left great toe.

CURRENT MEDICAL TREATMENT

Tina Lindquist Ossa reports she sees Dr. Hood approximately every four to five months for follow-up of her hands. She indicates he removed scar tissue from her left hand on January 30, 2006. She is now attending physical therapy once a week for massage and range of motion activities and continues to do home exercises for mobility of her transplanted toe. She is unsure how long the therapy will last. She is to follow-up with Dr. Hood in April 2006.

Mrs. Ossa also reports seeing Dr. Susan Kaufman as her primary care physician. She indicates no ongoing treatment issues with Dr. Kaufman. Mrs. Ossa reports she is scheduled to see Dr. Hou, a Gynecologist, because of irregular menstruation cycles.

Per our interview, Mrs. Ossa reports she does not take any medications on a scheduled basis. She indicates she will take Lortab, for pain, if necessary. She did not know the dosage of the Lortab and was unable to indicate a schedule of frequency. June 2005 deposition testimony indicates she had taken pain medication ten to fifteen times over the last few months.

CHIEF REPORTED PROBLEMS

Tina Lindquist Ossa has reduced fine and gross motor functioning with her bilateral hands. She has undergone multiple surgeries to improve her level of functioning and decrease her pain and discomfort. Her hands are smaller as a result of the amputation and re-implantation of her digits. On her right hand she has her thumb and long and ring fingers. Her ring and long fingers are able to grip and function, however with reduced strength and stamina. On her left hand she has her thumb and a transplanted second toe.

Mrs. Ossa reports her most significant area of dissatisfaction following her injuries is the level of dependence she now has on her husband and family. She indicates she now has low self-esteem. She considered herself active and independent prior to her injuries and now requires help and assistance. Mrs. Ossa reports she gets upset when she observes someone staring at her hands.

Mrs. Ossa also identified limitations and concerns involving her ability to function independently in the home and community. She reports difficulty gripping and manipulating items that are small, wider than her hands, or weigh more than approximately ten pounds. She also reports increased pain and discomfort in her hands, as well as experiencing sharp stabbing pains at times. She also reports pain and numbness at the site of her right second toe removal. Mrs. Ossa states doing most activities increase the discomfort in her hands and she will need to stop and rest her hands. She also notes needing additional time to accomplish most tasks and activities and decreased endurance and stamina. She also reports difficulty sleeping and having gained approximately fifty pounds since her injuries.

She reports difficulty washing her hair, putting on jewelry, buttoning or zippering, and putting on socks or pants. She reports difficulty cleaning her home, the dishes and handling a vacuum cleaner. She requires assistance washing laundry and has trouble folding clothes. She needs help shopping for food because it is difficult handling and manipulating items including two liter soda-pop bottles, large bags of dog food, and carrying bags. Her meal preparation is limited to light meals as she has trouble peeling potatoes, draining pasta, and stirring food products, as well as opening boxes, bags, jars with screw lids, and soda cans. She reports using the assistive devices provided by Ms. Mahoney in November 2004, however they do not allow her to be as independent as she would like.

EDUCATIONAL/VOCATIONAL HISTORY

Tina Lindquist Ossa attended Corry High School in Corry, Pennsylvania. She graduated in 2000. While in high school she volunteered as a Candy Stripper at Corry Hospital, at a local nursing home, and as an aide with children. She reports her curriculum was general in nature and that her grade point average was 3.5.

Mrs. Ossa did not pursue any post-secondary education. She reports having considered nursing as a possible vocation following high school and prior to her injuries, however she reports no actions involving making applications to any local training or education institutions. Her personnel records and deposition testimony indicate she was able to complete on-the-job training related to her position with Corry Manufacturing Company.

Mrs. Ossa's job history is limited. She reports working six months as a waitress at a local Pizza Hut. She reports she enjoyed that job because she was able to meet and serve people. She left Pizza Hut to work at Corry Manufacturing Company because of the opportunity to earn more money. Records indicate she started in November 2000 as a Component Tech I. Her duties included operating a press brake. She was also responsible for maintaining her work area.

Mrs. Ossa reports she has not worked since her injuries in September 2002. She currently receives Worker Compensation of \$527.86 every two weeks. She also reports having applied for Social Security Disability Benefits. She indicates she has healthcare benefits via her husband's policy.

ENVIRONMENTAL/SOCIAL

Tina Lindquist Ossa lives in Corry, Pennsylvania with her husband Jamie. June 2005 deposition testimony indicates they were married on September 10, 2004. Mr. Ossa has worked full-time as a Driver for Waste Management for approximately three years. She reports no difficulties with the physical setting of her home. Her landlord installed handled door levers and eliminated doorknobs. She reports receiving no personal care assistance at this time, however the need for this type of assistance was necessary following most of her previous surgical interventions.

She also reports caring for her two stepchildren, Robert age seven and Brandon, age four, per terms of her husband's custody agreement. She reports seeing them on a varied schedule, but usually every week. She states at times she would call her mother or sister for assistance. It is noted in the June 2005 deposition that her mother works as a Crossing Guard and her sister works as a Housekeeper at Corry Hospital. Her father works at Corry Rubber.

Mrs. Ossa reports she drives an automobile with an automatic transmission and drove to our interview on March 3, 2006, an approximately forty-five minute trip. June 2005 deposition indicates she walks the smaller of her two dogs. She also reports going shopping and will visit friends and family.

Prior to her injuries Mrs. Ossa enjoyed playing golf and volleyball, swimming, and reading. She did not belong to any golf or volleyball leagues. She did not belong to any community, religious, or social organizations. At this time she does not golf or play volleyball. She reports trying golf but was unable to hold the club. She has not tried swimming. She has not joined any social, community, or religious organizations. She does not volunteer. She does no yard work. She states she continues to read fiction and periodicals.

BEHAVIORAL OBSERVATIONS

Tina Lindquist Ossa presents as a pleasant, personable, and likable individual. Her appearance was neat and clean, wearing make-up and contacts. She was dressed appropriately for the occasion. She shook my hand and after some initial nervousness was able to initiate and maintain good eye contact. She was cooperative in responding to interview questions. Her communication skills were appropriate to her level of education. She demonstrated a subtle sense of humor.

Mrs. Ossa is able to identify her abilities and areas of independence. However, she indicates uncertainty of her ability to again work in any type of employment setting. She is unsure of any vocational options or opportunities available to her. She notes an interest in a career where she will be able to help people. She did note she would be unable to become a nurse.

When discussing her attending post-secondary training or school, she reports feelings of fear and uncertainty. She indicates having "looked into" Edinboro University and Penn State Erie, The Behrend College, both four year schools located in her area. However she did not arrange a time to meet with an admissions counselor. In discussing this in detail Mrs. Ossa believes she is intelligent enough to learn and benefit from school. She is concerned she will not be able to do well or keep-up with the classes/curriculum. She notes her writing speed is diminished. She is also concerned that she will be seen as an outcast as a result of her disability. I shared with her how most colleges and universities have student support offices to assist individuals with disabilities and how accommodations can be made for her reduced writing speed. Mrs. Ossa reports her husband is supportive of her attending school.

We then discussed the nature and purpose of vocational rehabilitation. When asked, Mrs. Ossa indicates having heard of the Pennsylvania Office of Vocational Rehabilitation (OVR). At the time of our interview she had not contacted them to discuss their services. She also had not applied for their services. I briefly presented the nature of OVR's services and how they may assist her via education, training, equipment, technology, and employment.

Mrs. Ossa expresses feelings of loss when discussing her limitations. Though she has demonstrated some adjustment to her disability, I would suggest focused, short-term psychological and career counseling. Each would provide for intervention and support regarding her adjustment to disability and vocational goal and plan development. Mrs. Ossa indicates she would participate in this type of therapy, however does not want to return to Ms. Blue at the Counseling Services Center, Inc.

LIMITATIONS/CAPABILITIES

There are no formal Functional Capacity Evaluations included in the records reviewed. There were also no physical capacities outlined for Tina Lindquist Ossa by Dr. Hood.

Mrs. Ossa reports she is able to stand or walk one to two hours at a time before she must sit and rest her right foot. She notes since the toe transplant she has pain and numbness at the donor site and cramping of the right great toe after being on her feet for that length of time. She notes the cramping occurs sooner if walking on uneven ground, cement, on hilly terrain, or climbing several flights of stairs. She notes her balance is diminished if she has to stand on her right foot.

Mrs. Ossa reports decreased stamina and endurance. She reports her immune system is depressed.

LIMITATIONS/CAPABILITIES (Continued)

Regarding her hands, she reports being able to lift a gallon of milk if her hands are feeling okay. She can lift a can of soup without difficulty. She has pain and discomfort when gripping items with either hand. She reports a loss of sensation with her transplanted toe. Mrs. Ossa has general increased sensitivity to temperature changes bilaterally, including outside to inside temperature changes, with the left worse than the right. She indicates her hands will hurt for a sustained amount of time following these temperature changes.

She indicates no restrictions with her balance, bending, twisting, kneeling, stooping, squatting, sitting, reaching forward, reaching above her shoulder, breathing, hearing, speaking, and cognitive functioning.

Based on her description of her abilities and limitations and file information it is likely Mrs. Ossa would be able to perform the physical activities required by a Sedentary work situation. The U.S. Department of Labor's *Dictionary of Occupational Titles* describes Sedentary work as exerting up to ten pounds of force occasionally and/or a negligible amount of force frequently to lift, carry, push, pull, or otherwise move objects, including the human body. Sedentary work involves sitting most of the time, but may involve walking or standing for brief periods of time. Jobs are Sedentary if walking and standing are required occasionally and all other Sedentary criteria are met.

There are jobs that are Sedentary in nature that are beyond Mrs. Ossa's abilities. However, there are Sedentary occupations that do not involve grasping, feeling, lifting, walking, climbing, or working in various temperatures.

VOCATIONAL ASSESSMENT

Considering the combination of the bilateral upper extremity and right foot impairments, it is reasonable to consider that Tina Lindquist Ossa is not able to perform the duties of a Component Tech I /Press Brake Operator or Waitress. Fortunately Mrs. Ossa does possess skills and abilities that can be transferred to other jobs.

Transferable skills are occupationally significant characteristics not directly affected or eliminated by the existence of an impairment or disability. Based on her educational attainment and experience, Mrs. Ossa possesses the academic skills, aptitudes, and temperaments that can be applied in other types of work. Previous work experience indicates Mrs. Ossa has average reasoning development. June 2005 deposition testimony indicates she earned above average grades in math courses. Her current aptitudes include the general ability to learn, reason, and use judgment, as well as to understand and use words effectively. She has also demonstrated temperaments, the adaptability requirements imposed on the worker by specific types of job situations, for performing repetitive work, attaining precise limits, and dealing with people.

Also, Mrs. Ossa's vocational options and opportunities can increase with the completion of post-secondary education. Based on her reported high school grade point average of 3.5 it is likely she would score well enough on the Scholastic Achievement Tests for entrance to some schools. Her educational options would be limited by her residual upper extremity functioning, but could include curriculums beyond her reported area of interest of psychology to include social work, rehabilitation, rehabilitation administration, business administration, finance, or marketing.

VOCATIONAL ASSESSMENT (Continued)

Traditional post-secondary school curriculums provide the student the flexibility to attend school year round. They are experienced when dealing with individuals with a disability in terms of scheduling and providing student support services including counseling and tutorial support. Also, many post-secondary schools offer distance learning curriculums that incorporate the use of the Internet, providing the potential student even more flexibility with regard to class attendance and the management of their time.

CASE CONSIDERATIONS**Employability**

Tina Lindquist Ossa possesses the ability to perform jobs within her local geographic area. The likelihood of her securing competitive employment will increase were she to receive short-term services from a Vocational Rehabilitation Specialist and Occupational Therapist familiar with home and worksite accommodations and assistive technology. During this time it is suggested that Mrs. Ossa receive a refresher in computer operations and detailed instruction in modified keyboarding.

The Vocational Specialist will assist Mrs. Ossa by locating and creating employment opportunities. This includes resume development, job search skills, interview skills, and job development activities. They will also provide career exploration activities. This includes career counseling toward identifying feasible careers based on her residual skills. It also can involve researching and visiting local colleges or training facilities to evaluate the nature of their programs and the availability of support services. This may also involve visiting employers and talking with individuals performing her selected occupations or professions.

The Occupational Therapist will be able to assist by identifying additional materials and methods to improve and expand Mrs. Ossa's level of independence in the home, her community, at work, and in school. Home visits working with Mrs. Ossa while using suggested materials or methods is a key part of this service. The therapist would be able to evaluate and suggest formal and informal materials to increase her ability to cook, clean, and provide for her family's needs. They can also explore and train her in such assistive technologies as voice recognition software, modified keyboarding, writing tools, organizational devices, and hands-free headsets for telephoning. Should the Vocational Rehabilitation Specialist require any worksite accommodations or assistive technology, the Occupational Therapist would be able to assist as they are familiar with Mrs. Ossa's abilities and restrictions.

Also, as an individual with a disability, Mrs. Ossa may be a candidate for vocational rehabilitation services through the Pennsylvania Office of Vocational Rehabilitation (OVR). They provide individualized vocational assistance to any individual with a disability that is interfering with securing or maintaining employment. Vocational assessment, career exploration, disability specific skill training, job development, job placement assistance, work tool/equipment modifications, technology assessments, and post-secondary education are some of the services they provide. In addition, they can counsel her on federally mandated programs to allow for reasonable accommodations in the school and work environments, as well as any tax incentives for employers hiring individuals with disabilities.

CASE CONSIDERATIONS (Continued)**Comments Regarding Donal F. Kirwan Report**

There are a number of factors that affect vocational potential. These include age, work history, socioeconomic and educational history, motivation, aptitudes, and geographic location. Based on Mrs. Ossa residual abilities, she will experience a reduction of the types of occupations she can now access. However, that does not translate into a certain reduction to future earnings since there are occupational options available to Mrs. Ossa that are Sedentary in nature and do not require adaptive technology.

Also, Mr. Kirwan does not take into account the impact a vocational rehabilitation program that includes field support, career guidance, availability to assistive technology, and post-secondary education could have on Mrs. Ossa's occupational possibilities. He fails to address Mrs. Ossa's own statements of an earlier interest in post-secondary education and an interest of working outside of the manufacturing industry. Mr. Kirwan refers to Title 38 of the Code of Federal Regulations, a Veterans Administration (VA) schedule for rating the percentage of disability. It should be noted a Veteran might have a 100% disability rating and still be a candidate for Vocational Rehabilitation through the Veteran Administration's Vocational Rehabilitation and Employment Program.

Every individual with a disability is unique and the implications of each disability are specific to that individual and his or her environment. Tina Lindquist Ossa now has the capacity to perform in several job positions as I will discuss below. She also has the opportunity and time to choose reasonable and appropriate vocational goals that will allow for an earning capacity commensurate with her career choices.

WAGE EARNING CAPACITY

Considering Tina Lindquist Ossa's skills, abilities, and reported limitations, I have identified general occupational areas as well as specific existing jobs that would be suitable for her to consider.

Labor Market Review - Employment and Wage Statistics

2004 Employment & Wage Statistics reports (Office of Employment Statistics, United States Department of Labor) for the Metropolitan Statistical Area (MSA) of Erie, Pennsylvania provide information detailing average yearly wages.

These occupations are appropriate for Mrs. Ossa with the above mentioned rehabilitative services. Mean yearly wages for 2004 ranged from \$14,600 to \$28,900.

Occupation Title	Mean Annual Wages
Cashier	\$14,600
Hotel, Motel, and Resort Desk Clerks	\$16,490
Receptionists and Information Clerks	\$19,080
Order Clerks	\$26,300
Real Estate Sales Agent	\$28,920

WAGE EARNING CAPACITY**Labor Market Review - Employment and Wage Statistics (Continued)**

These occupations reflect wages should Mrs. Ossa obtain a four year degree in business, social work, or psychology, or a graduate degree in social work or rehabilitation counseling. Mean yearly wages for 2004 ranged from \$24,990 to \$39,420.

Occupation Title	Mean Annual Wages
Community and social service Specialists	\$24,990
Customer Service Representatives	\$27,920
Mental Health Counselors	\$28,560
Procurement Clerks	\$28,650
Rehabilitation Counselors	\$28,800
Medical and Public health Social Workers	\$33,100
Child, Family, and School Social Workers	\$37,890
Social and Community Service Managers	\$39,420

Labor Market Review - Current Job Openings

The labor market review also included research regarding open job positions. Resources included *The Erie Times-News*, the Pennsylvania CareerLink job posting network, and the New York State Department of Labor Job Bank, and employer job postings.

These occupations are appropriate for Mrs. Ossa with the above mentioned rehabilitative services. All are full-time positions unless otherwise noted. Those with and * offer benefits that can include vacation time and/or medical coverage. Yearly wages range from \$13,936 to \$26,000.

Job Title	Hourly or Yearly Wages
Customer Service Representative *	\$6.70/hour
Teleservices Representative	\$7.50/hour
Home Telesales Position	\$8.00/hour
Call Center Representative	\$8.13/hour
Teleservices Representative	\$8.50/hour
Customer Service Representative	\$9.00/hour
Dispatcher	\$10.50/hour
Outside Sales Position *	\$12.50/hour
Market Research Interviewers *	Competitive Salary
Research Interviewer	Competitive Salary
Front Desk Worker, Part-Time	Competitive Salary
Front Desk Clerk	Competitive Salary
Front Desk Clerk, Part-Time	Competitive Salary
Real Estate Career Seminar	Recruiting Agents

WAGE EARNING CAPACITY**Labor Market Review - Current Job Openings (Continued)**

These occupations reflect wages should Mrs. Ossa obtain a four year degree in business, social work, or psychology. All are full-time positions unless otherwise noted. Yearly wages range from \$16,640 to \$29,640.

Job Title	Hourly or Yearly Wages
Customer Service	\$8.00/hour
Outreach Worker	\$12.31
Service Coordinator	\$14.25/hour
Case Worker	Competitive Salary

Benefits vary depending on location and type of job. In general, professional level jobs, such as those listed above, include benefits.

SUMMARY/CONCLUSIONS

Tina Lindquist Ossa has reduced fine and gross motor functioning as a result of bilateral hand injuries sustained during a work related incident on September 25, 2002. She has undergone multiple surgical interventions since that time to improve her level of functioning.

Despite physical impairments, Mrs. Ossa possesses worker traits, abilities, and skills that would allow her to secure gainful employment with the short-term support of trained vocational and occupational therapists. She would be capable of securing and maintaining full-time gainful employment. She would be capable of earning from \$13,936.00 to \$28,920.00.

In addition, Mrs. Ossa's occupational options could expand should she decide to obtain a post-secondary education in social services or business administration. This would further increase her earnings potential from \$16,640 to \$39,420.

The above are my opinions to within a reasonable degree of professional certainty.

I reserve the right to supplement this report based upon additional evidence or documents that may be presented or become available.

DAVID A. ZAK
402 Forest Ridge Drive
Pittsburgh, PA 15221
Telephone #: 412-351-3949
Fax #: 412-351-7122
david@zakrehab.com

EDUCATION

University of Pittsburgh
 Pittsburgh, PA

Master of Education, 1987
 Curriculum & Supervision

The Pennsylvania State University
 State College, PA

Bachelor of Science, 1982
 Special Education

PROFESSIONAL CERTIFICATIONS/LICENSES

Certified Life Care Planner, Expiration Date: October 2006

Certified Rehabilitation Counselor, Expiration Date: March 2010

Commonwealth of Pennsylvania, Professional Counselor, Expiration Date: February 2007

Pennsylvania Instructional II Certification in Special Education

PROFESSIONAL EXPERIENCE

Rehabilitation Consultant
Pittsburgh, PA

October 1998 to Present

- Meet with clients to assess their functional skills, education, experience, and rehabilitative needs
- Develop medical management, life care, or vocational rehabilitation plans
- Complete transferable skills analyses and provide vocational counseling and guidance
- Provide adjustment to disability counseling
- Locate, coordinate, and manage services to meet client needs and to deal with barriers encountered
- Make referrals to local providers as needed
- Interface with medical, rehabilitative, educational staff, and employers to promote client's overall progress
- Deliver job seeking skills training, job development and placement services
- Provide expert testimony on vocational potential and life care plans
- Conduct labor market analyses of various occupational groups in the Western Pennsylvania, West Virginia, Ohio, and Maryland geographical area
- Produce comprehensive evaluation, progress, and discharge reports and expert opinions
- Provide Field Case Management services for the Pittsburgh Regional Vocational Rehabilitation and Employment office and for Long Term Disability and Workers Compensation insurers

Senior Rehabilitation Specialist
CIGNA, Managed Disability, Pittsburgh, PA

June 1993 to October 1998

- Evaluate claimant's present levels of functioning
- Determine realistic and feasible career goals, complete transferable skills analyses
- Developed rehabilitation plans utilizing educational, medical and vocational resources.
- Apply knowledge of local or national job markets to establish feasible vocational objectives
- Communicate and discuss plans to internal support team
- Research and locate external resources to facilitate the accomplishment of developed goals
- Create project and training protocols to enhance skill development of staff
- Maintain data management systems to evaluate performance of staff and providers
- Developed and presented materials for policyholder presentations

PROFESSIONAL EXPERIENCE (Continued)**Career Development Specialist**The Rehabilitation Institute; Pittsburgh, PA**February 1991 to June 1993**

- Developed individualized vocational evaluation and rehabilitation plans
- Administered, scored, analyzed, and reported various vocational tests and work samples
- Provided individual career counseling and coordinated job readiness activities
- Conducted job development and placement activities
- Analyzed transitional environments to determine appropriateness of physical environment, performance expectations and the need for accommodations
- Initiated and maintained frequent contact with staff, employers, family, referral agencies, and community resources
- Produced written evaluation reports, weekly performance objectives, and discharge plans

Rehabilitation Specialist**February 1990 to Feb. 1991**Central Rehabilitation Associates; Pittsburgh, PA

- Provided vocational assessment and counseling to physically disabled adults
- Conducted job development and placement activities
- Developed and implemented rehabilitation plans emphasizing job-seeking skills, interview techniques, and appropriate career investigation
- Facilitated communication between the client, physician, therapist, teacher, and employer.

Special Education Teacher & Vocational Specialist**June 1983 to February 1990**The Rehabilitation Institute; Pittsburgh, PA

- Performed comprehensive vocational and cognitive/behavioral evaluations of adults
- Created and implemented rehabilitation plans
- Designed and implemented behavior modification programs for individual and group settings
- Developed activities that promoted skill generalization for transition to work or school
- Provided individual and group counseling to improve self-awareness & acceptance, social skills, career identification, and self-mediation
- Continually interacted with interdisciplinary staff, family, teachers and therapists
- Developed and coordinated practicum training programs for Bachelor and Master level rehabilitation counseling students

Special Education Teacher**August 1982 to June 1983**Pressley Ridge School, Pittsburgh, PA

- Developed and implemented Individualized Education Programs for young adults with psychiatric and learning disabilities
- Utilized a multi-level behavior modification program
- Assisted in management of student activities and special events

PROFESSIONAL ACTIVITIES

Pennsylvania Rehabilitation Council, Public Forum Facilitator, Vocational Rehabilitation for Pennsylvanians with Disabilities, June 10, 2003

Coalition to Establish an Office for People with Disabilities, Committee Member, April 2003 to Present

Community Living and Support Services, Inc., Vice-President / Board Member, United Cerebral Palsy (UCP) Association of the Pittsburgh District, 2001 to Present

PROFESSIONAL ACTIVITES. (Continued)

Veterans Administration, Pittsburgh Regional Office, Field Case Manager, January 2000 to Present

Community Living and Support Services, Inc., Member of the Quality Service Program Committee, United Cerebral Palsy (UCP) Association of the Pittsburgh District, 1999 to Present

Carlow College, Supervisor, Undergraduate Special Education Student Teachers, 1999 to 2004

Keystone Neuro-Rehab, Rehabilitation Counselor, Community Re-Entry for adults with traumatic brain injuries, developmental / learning disabilities, and orthopedic disabilities, 1998 to 2004

The Rehabilitation Institute of Pittsburgh, Internship Site Supervisor, Undergraduate and Graduate Rehabilitation Counseling Students, 1983 to 1990

PROFESSIONAL PRESENTATIONS

“So You Think You Want To Become A Life Care Planner,” International Association of Rehabilitation Professionals, Scottsdale, AZ, May 2004

“Empowerment: A Dynamic Model for Successful Rehabilitation,” National Rehabilitation Association, Norfolk, VA, September 1996

“Accessing Technologies: The Internet,” 48th Annual President’s Committee on Employment of People with Disabilities, Portland, OR, May 1995

“Rehabilitation, An Insurance Perspective,” APTA, Washington D.C., May 1995

“Head Injury Rehabilitation,” CIGNA Group Insurance, Pittsburgh, PA, May 1994

“Comprehensive Job Development,” Office of Vocational Rehabilitation, Washington, PA, October 1992

“Interpreting Evaluation Results for Return to Work,” CRA, Pittsburgh, PA, February 1991

“Continuum of Care – Vocational Evaluation,” Pennsylvania Association of Rehabilitation Facilities, Pittsburgh, PA, September 1990

“Groups, Goals, and Accountability,” 10th Annual Traumatic Head Injury Conf., Braintree, MA, October 1989

“Groups, Goals, and Accountability,” PARF Annual Conference, Donegal, PA, October 1989

“Continuum of Care Vocational Programming,” PARF Annual Conference, Philadelphia, PA, September 1988

“Vocational Re-Entry,” National Head Injury Foundation, Pittsburgh, PA, February 1988

“The Not-So-Disabled Disabled,” Community Awareness Program, Pittsburgh, PA, December 1987

“Vocational Counseling and Therapy for the Disabled Student,” Duquesne University, Pittsburgh, PA, December 1987

“Skill Generalization in the Vocational Setting,” 3rd Annual Exceptional Care Conference: Community Re-Entry, Pittsburgh, PA, September 1987

“Accommodations in the Workplace,” Office of Vocational Rehabilitation, Pittsburgh, PA, September 1984

CONTINUING EDUCATION

2005 International Conference on Life Care Planning, MediPro Seminars, LLC, San Francisco, CA, September 2005

Technology for the Technology-Dependent Client, MediPro Seminars, LLC, San Francisco, CA, September 2005

International Association of Rehabilitation Professionals, Professional Development, Scottsdale, AZ, May 2004

Life Care Planning for Catastrophic Case Management, Intellicus/University of Florida, Module 8, Pittsburgh, PA, February 2004

2003 International Conference on Life Care Planning, MediPro Seminar, LLC, Dallas, TX, October 2003

Life Care Planning for Catastrophic Case Management, Intellicus/University of Florida, Modules 3, 4 & 7 Pittsburgh, PA, October 2003

Life Care Planning for Catastrophic Case Management, Intellicus/University of Florida, Modules 5 & 6, Washington D.C., April 2001

Life Care Planning for Catastrophic Case Management, Intellicus/University of Florida, Modules 1 & 2, Atlanta, GA, January 2001

Pennsylvania Rehabilitation Association, Professional Development, Harrisburg, PA, April 2000

Pennsylvania Association of Rehabilitation Facilities, Harrisburg, PA, March 1999

America Physical Therapy Association, Spring Insurance Forum, Washington, D.C., February 1999

American Physical Therapy Association, Spring Insurance Forum, Washington, D.C., February 1998

Northeast Regional Rehabilitation Roundtable, Pittsburgh, PA, April 1997

Mental Health Disorders: DSM-IV Training, Pittsburgh, PA, August 1996

Northeast Regional Rehabilitation Roundtable, Boston, MA, April 1996

American Physical Therapy Association, Spring Insurance Forum, Washington, D.C., April 1996

Disability Income Training, Health Insurance Association of America, April 1996

48th Annual President's Committee on Employment of People with Disabilities, Portland, OR, May 1995

American Physical Therapy Association, Winter Insurance Forum, Washington, D.C., February 1995

American Physical Therapy Association, Annual Insurance Forum, Washington D.C., October 1994

7th Annual Disability Management Conference, Washington Business Group on Health, Washington, D.C., November 1993

Job Placement Techniques for the Disabled Adult, PRCA, Pittsburgh, PA, September 1991

Pennsylvania Workers Compensation Law, Pittsburgh, PA, May 1990

Rehabilitation Challenges for the 90s, PRCA, Pittsburgh, PA, November 1989

CONTINUING EDUCATION (Continued)

Community Reintegration Through Scientifically Based Practice, Virginia Commonwealth University, Richmond, VA, September 1988

Industrial Medicine Seminar, Good Shepherd Rehabilitation Hospital, Allentown, PA, October 1987

Biomechanics and Ergonomics in the Workplace, Philadelphia, PA, October 1986

Drug and Alcohol Abuse in the Head Injured Person, Pittsburgh, PA, May 1985

ADDITIONAL ACTIVITIES

Member of Early Vocational Intervention Protocols Development Committee, CIGNA, Pittsburgh Claim Office, February through October 1996

Member of Clinical Sufficiency Development Project Committee, CIGNA, Pittsburgh Claims Office, June through October 1995

Developed and maintained Functional Capacities Evaluation Network & Protocols, CIGNA, Pittsburgh Claims Office, September 1993 to 1998

Supervised work-site evaluations and accommodations, CIGNA, Pittsburgh Claims Office, 1993 to 1998

MEMBERSHIPS

The International Association of Rehabilitation Professionals

The International Association of Life Care Professionals

National Rehabilitation Association

National Rehabilitation Counseling Association

Pennsylvania Rehabilitation Association

Pennsylvania Rehabilitation Counseling Association

Client: Defense

Richard Bella Deposition	vs.	Life Insurance Company of North America	5/1997
Stella E. Brown Deposition - PA	vs.	Tressler Lutheran Services	2/12/01
Deanne Blount Deposition - Washington D.C.	vs.	Washington Hospital Corp.	10/30/01
Paul Naret Trial - PA	vs.		8/04/02
Kevin DiNicola Trial - WV	vs.	Weirton Steel	5/12/04
John M. Barron Deposition - Maryland	vs.	Robert C. Moore, MD, et al	01/17/05
Melvin Heckel Deposition - WV Trial - Elkins, WV	v.	Kenneth D'Amato, D.O.	12/12/05 01/13/06

Client: Plaintiff

Thomas Houston Hearing - PA	vs.	Dale Nagel, Inc.	2/06 & 3/29/01
Walter Persing Trial - PA	vs.	CXS Transportation	6/20/01
Thomas Saluga Deposition - PA	vs.	Consol	4/31/02
Nikki Sadler Trial - PA	vs.	UPMC	3/24/03

David A. Zak, MEd, CRC, LPC, CLCP
P.O. Box 88
Turtle Creek, PA 15145-0088

Telephone: 412/351-3949
Fax: 412/351-7122
E-mail: david@zakrehab.com

SERVICES

- Vocational Rehabilitation Case Management
- Medical Rehabilitation Case Management
- Vocational Assessment
- Wage Earning Assessment
- Labor Market Survey
- Job Analysis
- Vocational Counseling
- Life Care Planning

FEESCHEDULE

Case Management Services: \$80.00 per hour plus expenses*
Vocational & Medical Rehabilitation

Litigation Support Services: \$120.00 per hour plus expenses*
Vocational Rehabilitation, Wage Earning
Assessment, Labor Market Survey,
Rehabilitation Consultation & Life Care Planning

* Expenses incurred including mileage @ \$.40/mile, fees paid, and out-of-town expenses,
when necessary including transportation, lodging, meals, etc.

TERMS

30 days from date of invoice to:

David A. Zak
ID # 201505484